

# *MMRS Development*



**Historical Overview of MMST / MMRS Development**

# MMST / MMRS History

- November 1995: U.S. PHS established partnership with the Washington Metropolitan Area Council of Governments (WMA-COG) to develop the WMA Metropolitan Medical Strike Team (WMA-MMST).
- January 1996: Operational WMA-MMST element activated for Presidential Inauguration in Washington, DC.
  - MMST element stands down after the inauguration.
  - WMA-MMST development process continues.

# MMST / MMRS History

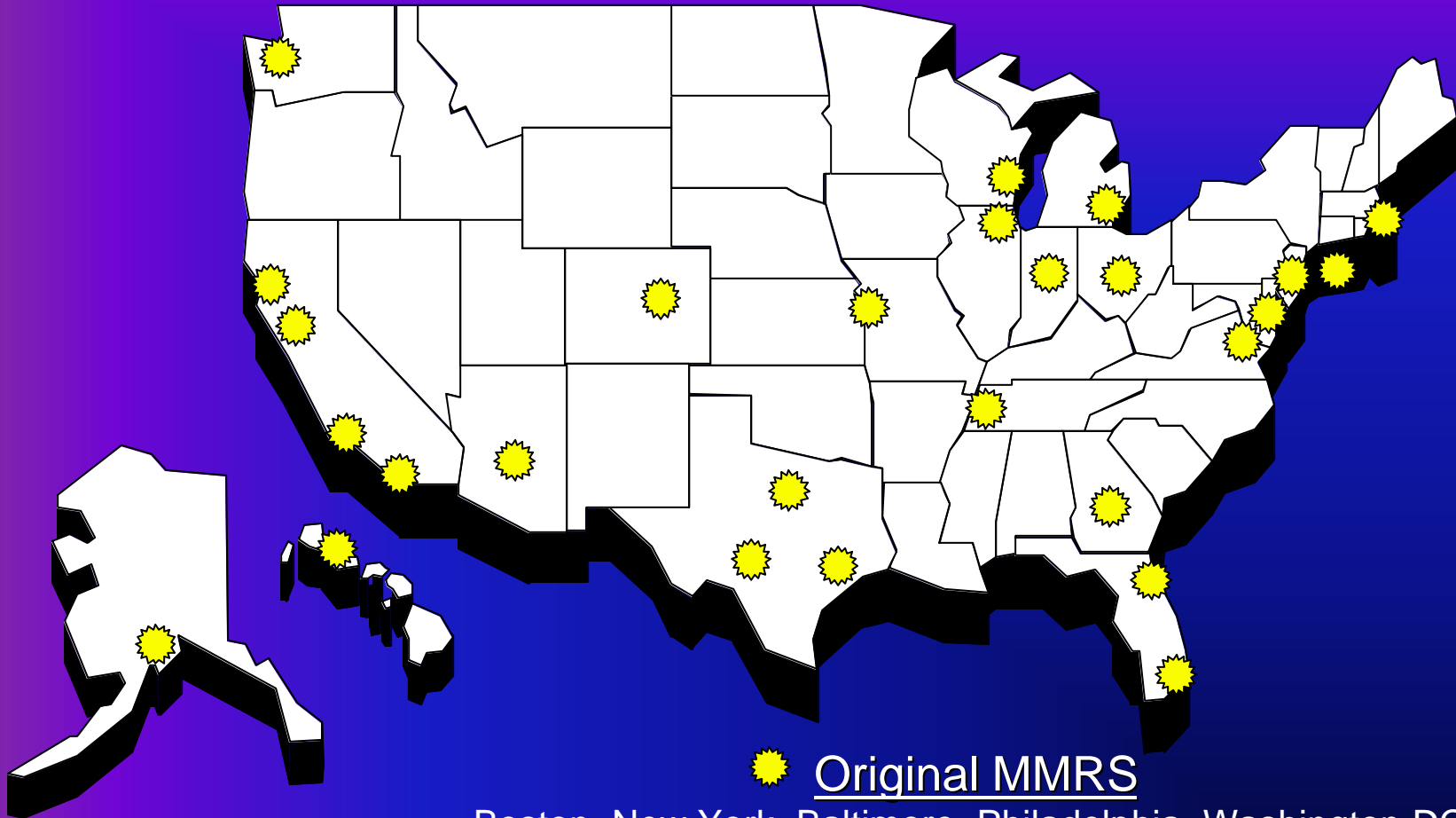
- June 1996: U.S. PHS established partnership with the Atlanta-Fulton County Emergency Management Agency (A-FCEMA) to develop the Atlanta Metro-politan Area MMST (AMA-MMST).
- July 1996: Operational AMA-MMST element activated in support of the Summer Olympic Games and is included in initial response to the Centennial Park Bombing.
  - At the conclusion of the Summer Olympic Games, MMST-element stands down.
  - A-FCEMA continues AMA-MMST development process.

# MMST / MMRS History

- December 1997: WMA-MMST declares operational readiness.
- September 1997 to Present: The initial 25 MMST system development jurisdictions continue to develop and refine their individual MMRSs in accordance with local requirements.

**EMPHASIS ON LOCAL RESPONSE CAPABILITY**

# Metropolitan Medical Response Systems



★ Original MMRS

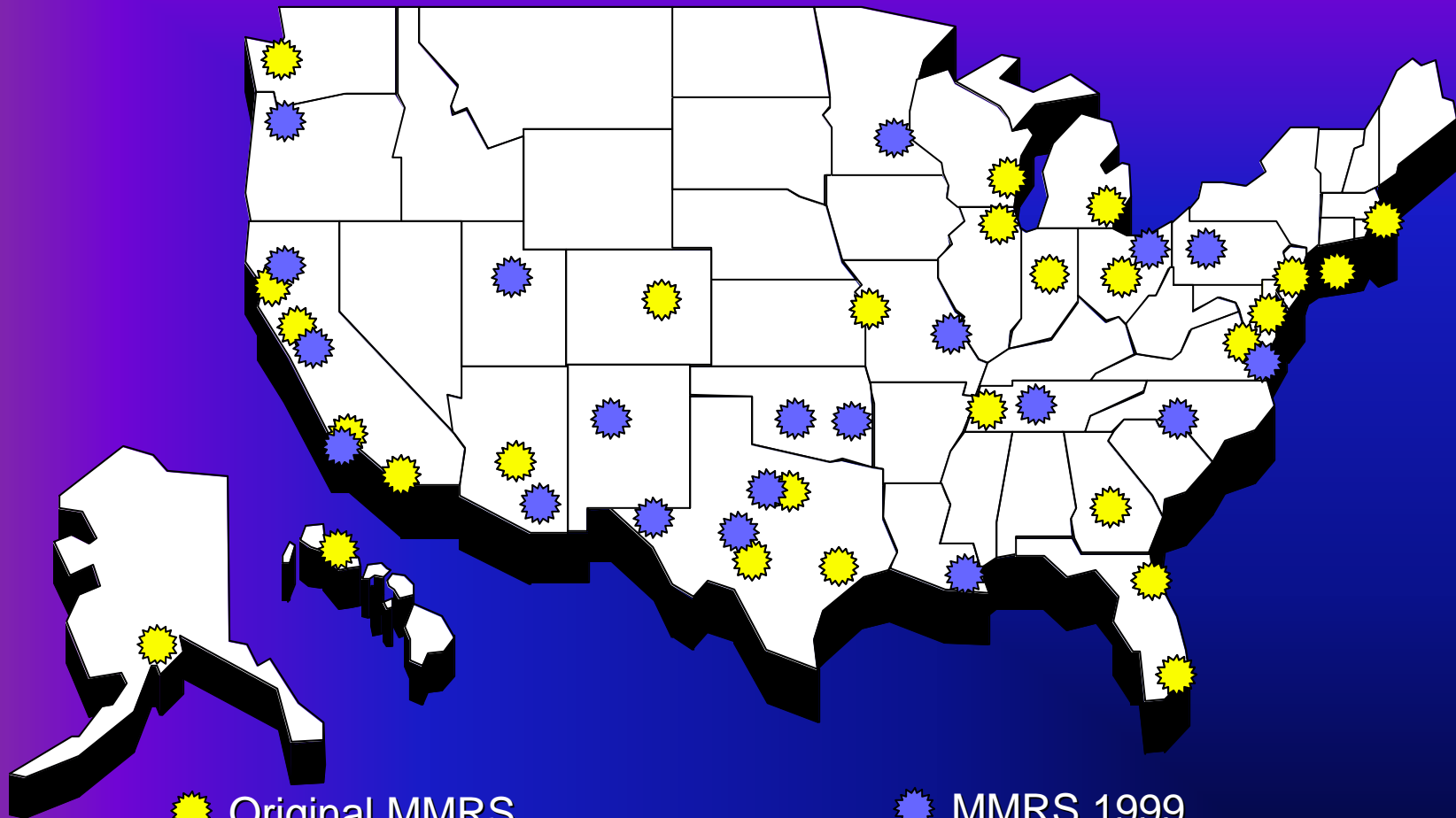
Boston, New York, Baltimore, Philadelphia, Washington DC,  
Atlanta, Miami, Memphis, Jacksonville, Detroit, Chicago,  
Milwaukee, Indianapolis, Columbus, San Antonio, Houston,  
Dallas, Kansas City, Denver, Phoenix, San Jose, Honolulu, Los  
Angeles, San Diego, San Francisco, Anchorage, Seattle

# 25 Metropolitan Jurisdictions

## Original MMRS

Boston, New York, Baltimore, Philadelphia, Washington DC,  
Atlanta, Miami, Memphis, Jacksonville, Detroit, Chicago,  
Milwaukee, Indianapolis, Columbus, San Antonio, Houston,  
Dallas, Kansas City, Denver, Phoenix, San Jose, Honolulu,  
Los Angeles, San Diego, San Francisco, Anchorage, Seattle

# Metropolitan Medical Response Systems



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## MMRS 1999

Hampton Roads (Virginia Beach)Area, Pittsburgh, Nashville, Charlotte, Cleveland, El Paso, New Orleans, Austin, Fort Worth, Oklahoma City, Albuquerque, St. Louis, Salt Lake City, Long Beach, Tucson, Oakland, Portland (OR), Twin Cities (Minneapolis), Tulsa, Sacramento

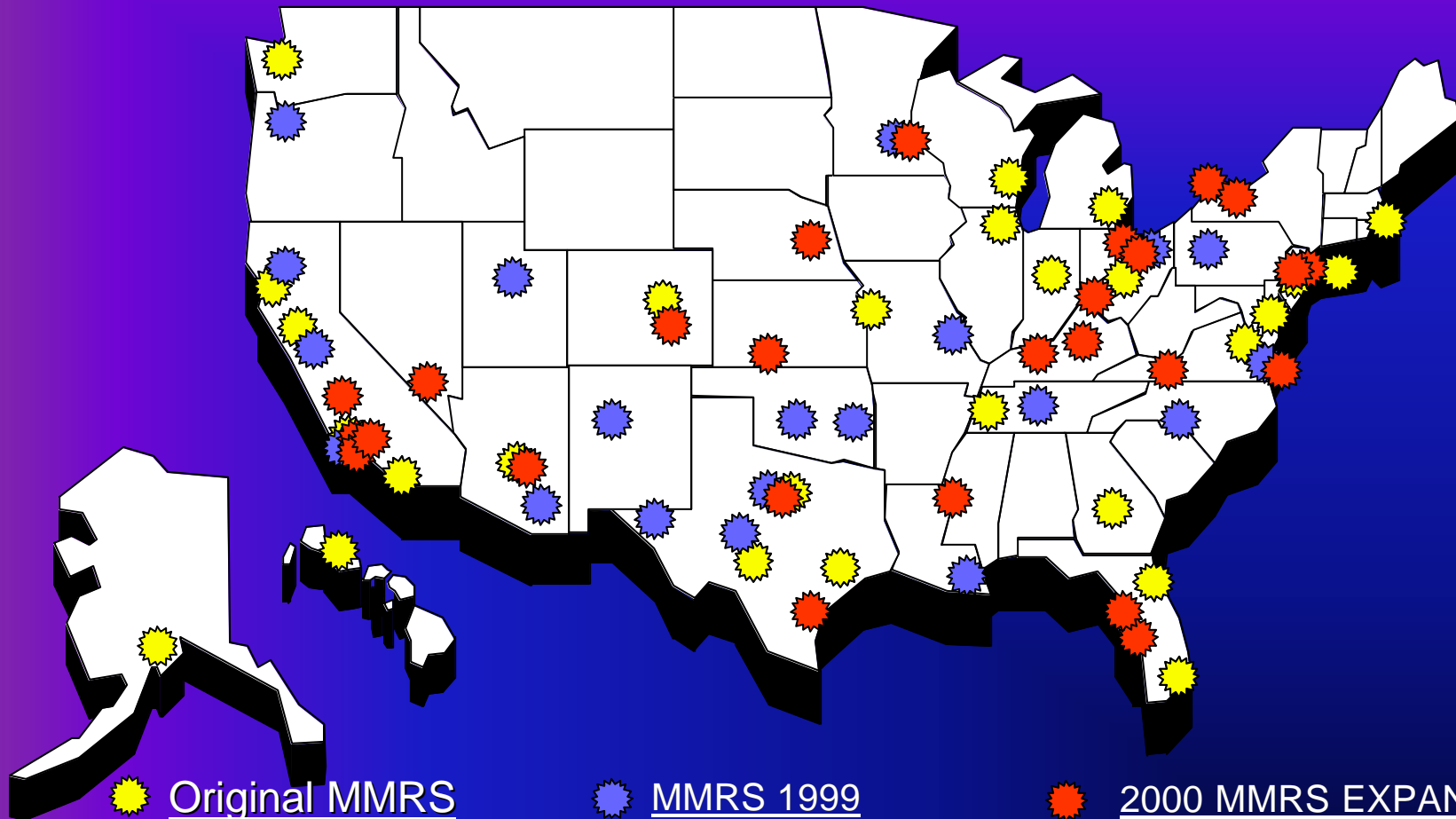
# **20 Metropolitan Jurisdictions**

## **MMRS 1999**

Hampton Roads (Virginia Beach)Area, Pittsburgh,  
Nashville, Charlotte, Cleveland, El Paso, New  
Orleans, Austin, Fort Worth, Oklahoma City,  
Albuquerque, St. Louis, Salt Lake City, Long Beach,  
Tucson, Oakland, Portland (OR), Twin Cities  
(Minneapolis), Tulsa, Sacramento



# Metropolitan Medical Response Systems



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## 2000 MMRS EXPANSION

Twin Cities (St. Paul), Hampton Roads (Norfolk), Cincinnati, Fresno, Omaha, Toledo, Buffalo, Wichita, Santa Ana, Mesa, Colorado Springs, Tampa, Newark, Louisville, Anaheim, Birmingham, Arlington, Las Vegas, Corpus Christi, St. Petersburg, Rochester, Jersey City, Riverside, Lexington-Fayette, Akron

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# **Suggested Development Process**

**I. Preliminary Coordination**

**II. Mission Concept of Operation and Organization**

**III. MMRS Operations & Field Operations Guide (FOG)**

**IV. Staffing and Equipment Requirements**

**V. Training**

# Suggested Development Process

- Designate responsible officer and office and identify the proposed membership of the development team.
- Form MMRS Development Steering Committee and subcommittees.
- Identify all contract requirements.
- Identify the plan philosophy and geographic area of operations the plan will cover.
- Coordinate with U.S. PHS Emergency Coordinator / Project Officer.

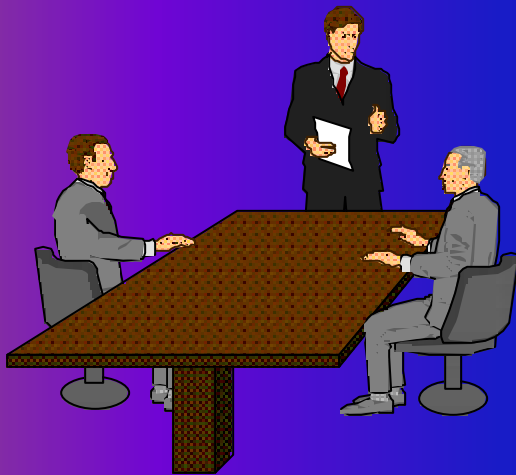
Preliminary Coordination

# Suggested Development Process

## Steering Committee

Comprised of a Chairman with representation from Fire, Hazardous Materials (HAZMAT), EMS; Public Health, Universities, Law Enforcement, Coroner, Local Hospitals, American Red Cross (local chapter), LEPC, Mental Health, Emergency Management Agency (EMA), Appropriate Professional Organizations, Regional Federal Partners, etc.

## Subcommittee Areas



- MMST or Capability
- Emergency Patient Transportation
- Hospital Emergency Services
- Mental Health Services
- Mass Fatality Management
- Forward Movement via NDMS

# **Suggested Development Process**

## **Committee / Subcommittee Considerations**

- **Plan Philosophy**
- **Command and Control**
- **Operations and Operational Area**
- **Staffing Requirements**
- **Training Requirements (initial and sustainment)**
- **Equipment Requirements**
- **Pharmaceutical Requirements**

# Suggested Development Process

## Develop MMRS Development Plan

- **Mission Statement**
- **Concept of Operations**
- **Organization Requirements**
- **Command and Control Procedures**



Mission, Concept of Operation,  
and Organization

# **Suggested Development Process**

Develop Plans for Operations, Training, Equipment, and Pharmaceuticals.

- **NDMS Plan for forward movement of patients.**
- **MMRS Response Plan for Chemical, Radiological, Nuclear, and Explosive WMD.**
- **MMST Operations Plan (if stand-alone component).**
- **Bio-WMD Management Plan.**
- **Local Hospital / Healthcare System Plan.**
- **Pharmaceuticals and Equipment Acquisition / Maintenance Plan.**



# Suggested Development Process



- **Staffing**

- Coordinate MMRS Personnel requirements



- **Equipment / Pharmaceuticals**

- Define preliminary list
- Prepare equipment acquisition list
- Prepare pharmaceutical acquisition list

Staffing, Equipment, and Pharmaceutical Requirements

# Suggested Development Process



- Accomplish MMRS Personnel Training
- Complete MMRS Exercises
- Develop MMRS Operational Effectiveness Review Process

Training / Exercises

# Alternate Response Approaches

## MMST / Capability

- **AUGMENTATION:** The approach adopted by the WMA-MMST. May be preferred if multijurisdictional issues arise.
- Requires the development of a separate Response Team / MMST.
- Upon receipt of an alarm, a traditional Fire / HAZMAT / EMS / Law Enforcement (LE) response occurs. The MMST would be activated and deployed as a separate element to **augment** the traditional response effort through coordination with the existing ICS.

# Alternate Response Approaches

## MMST / Capability

- **COMBINATION – Integration / Augmentation:** The approach adopted by the AMA-MMST.
- This approach provides for an enhanced capability integrated into the initial response, with pre-identified assets and additional response elements to augment the initial response effort.
- Upon receipt of alarm, a traditional Fire / HAZMAT / EMS / LE response occurs with select equipment and personnel integrated into the initial response effort. Additional response elements are activated and deployed to the scene, to augment the initial response effort, through coordination with the existing ICS.

# Alternate Response Approaches

## MMST / Capability

- **INTEGRATION:** The approach adopted by Seattle and Philadelphia.
- This approach **integrates the appropriate personnel, skills, and equipment** into the existing response organizations and elements.
- Upon receipt of alarm, the traditional Fire / HAZMAT / EMS / LE elements respond, bringing the specialized tools, equipment, and the personnel trained in their use to the incident scene. The existing ICS is able to implement appropriate plans and direct appropriate actions with minimal or no delay.

# MMRS Development

Feedback from the 1997 MMRS development cities has identified five key requirements for a successful development process:

- The designation of a responsible officer / office.
- The cooperation and support of all MMRS participants and response disciplines.
- A deliberate and systematic approach to development.
- Innovative thought and vision throughout the development process.
- Perseverance and dedication throughout the development process.

